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Bib Data Sheet

CONFIRMATION NO. 8145

|  |   |                               |   |                                       |
|--|---|-------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/044,131   | <b>FILING DATE</b><br>01/11/2002<br><b>RULE</b>   | <b>CLASS</b><br>375           | <b>GROUP ART UNIT</b><br>2631   | <b>ATTORNEY DOCKET NO.</b><br>22-0193 |
| <b>APPLICANTS</b><br>Daniel R. Franzen, Hermosa Beach, CA;<br>Daniel R. Lane, Santa Monica, CA;<br>Nicholas F. DiCamillo, Torrance, CA;  |   |                               |   |                                       |
| <b>** CONTINUING DATA *****</b> <i>RSD</i>   |   |                               |   |                                       |
| <b>** FOREIGN APPLICATIONS *****</b> <i>None RSD</i>   |   |                               |   |                                       |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 02/11/2002</b>   |   |                               |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>Raymond L. Di RSD</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>7  | <b>TOTAL CLAIMS</b><br>17             |
|  |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>3        |
| <b>ADDRESS</b><br>30050  |   |                               |   |                                       |
| <b>TITLE</b><br>Apparatus and method to implement a flexible hub-spoke satellite communications network  |   |                               |   |                                       |
| <b>FILING FEE RECEIVED</b><br>870  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |